

362.2905
A35h
May, June, July 1984



The Habit

STATE DOCUMENTS COLLECTION

SHELVED WITH
PERIODICALS

ALCOHOL AND DRUG ABUSE DIVISION
MONTANA DEPARTMENT OF INSTITUTIONS
1539 11TH AVENUE, HELENA, MONTANA 59620
MAY, JUNE, JULY, 1984

AUG 13 1984

MONTANA STATE LIBRARY
1515 E. 6th AVE.
HELENA, MONTANA 59620

ADVISORY COUNCIL MEETS

The Montana Advisory Council on Alcohol and Drug Dependency convened May 24 and 25 at the Alcohol and Drug Abuse Division offices in Helena to review and determine final recommendations for program funding requests.

For those persons employed in the field who are unaware of the composition of the council the members are as follows:

- Myrna Kuntz - Dawson Community College, Glendive
- Sharon Pettit - State Health Department, Helena
- Joe Plumage - Indian Health Service, Billings
- William Spoja - Attorney, Lewistown
- Larry Fasbender - Rancher, Former St. Senator, Fort Shaw
- B. Dean Holmes - Radio station, KPRK, Livingston
- Mary Ellen Connolly - State Representative Flathead County - Kalispell
- Tom Clavin - Alpha Industries - Helena
- Peggy Skelton - Business Woman, Missoula, Scottsdale, Az.

Programs requesting time for presentations to the Council were:

- Hilltop Recovery Center - Havre
- Chemical Dependency Services - District III, Miles City
- Beaverhead/Madison C.D. Facilities - Dillon
- Fort Belknap Tribes Alcohol Program - Harlem
- Boyd Andrew Service Center - Helena
- Butte Indian Alcohol Program - Butte
- Powell County Alcoholism Center - Deer Lodge

With only minor exceptions, the Advisory Council concurred with the A.D.A.D. staff Grant request recommendations. Increased funding was approved for four programs, while no decreases were suggested by the Board.

We Welcome Your Contributions

Like any other publication, the "Habit" is dependent upon items that are of interest to all of its readers. We are both willing and interested in receiving and including in the newsletter any material that you feel is relevant to the chemical dependency field, as well as being interesting or informative.

The publication has a wide circulation outside of Montana which provides you with an opportunity to "state your case" nationally as well as among programs in Montana.

Send you literary contributions to "The Habit" Alcohol and Drug Abuse Division, 1539 11th Avenue, Helena, Montana 59620.

The House passed on June 11 legislation (HR-5603) reauthorizing the alcohol, drug abuse and mental health services (ADMS) block grant and the discrete research program authorities of NIAAA and NIDA.

The Senate, which has passed ADMS Renewal legislation (S-2303), has not yet scheduled action on the separate NIAAA/NIDA reauthorization bill (S-2615) reported by the Labor and Human Resources Committee last month (AR, May 17). Convening of a joint conference to iron out a compromise between the reauthorizations was not anticipated until Senate passage of the NIAAA/NIDA renewal.

The House bill authorizes generous funding levels for the ADMS block over the next three fiscal years -- \$532 million next year, \$564 million in FY - 86 and \$598 million in FY - 87. But it extends the NIAAA and NIDA research programs for only two years at levels approximating the Administration's budget requests for the two Institutes next year -- \$48 million for NIAAA and \$64 million for NIDA -- with increases to \$55 million and \$72 million respectively in FY - 86.

During House consideration of the ADMS-NIAAA/NIDA renewal measure, Chairman Henry Waxman (D-CA) of the House Health Subcommittee noted that the legislation requires states to allocate at least 10 percent of their block grant funds for development or expansion of alcohol and drug abuse prevention and treatment services for women and for mental health services for severely disturbed children and adolescents. Waxman cited the needs of these populations as "urgent" and stressed that the block grant funds should "not simply supplant or subsidize ongoing state activities."

Waxman also underscored the expansion of responsibilities delegated to the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA) under the bill. In addition to administering the ADMS block, he said, ADAMHA is charged with developing a nationwide system for collecting data on the incidence of alcohol, drug abuse and mental disorders.

Representative Charles Rangel (D-NY), chairman of the House Select Committee on Narcotics Abuse and Control, urged House passage of the bill on grounds it will "assure a stable base of federal support" for the states in maintaining ADM services. But he said he believed "the current need for services, particularly in our urban centers, warrants a substantially greater commitment to substance abuse services."

Even with the authorization increases provided the ADMS block by the bill, Rangel said, the federal support for alcohol, drug abuse and mental health services "will fall far short of the levels that existed prior to the block grant, especially when inflation is taken into account." He also urged a "stronger federal commitment" to NIDA research than reflected in the bill.

Reprinted from the Alcoholism Report June 15, 1984 - Johnson institute.

* * * * *

Royce Gilbertson
Neighbor to Neighbor

The Director of the Alcohol Service Center of Lincoln/Sanders/Mineral Counties with offices in Libby, Thompson Falls and Superior is this issue's neighbor. Having your neighbor a few miles down the road is not uncommon in Montana. Royces' Sidney neighbor, however, is 650 miles down the road which gives him the distinction, among others, of being the Western most program in the state. In fact just a few miles more and he might have been featured in the Idaho Alcohol and Drug newsletter.

But geography being what it is, in 1976 Royce saw an urgent and pervasive need for an Alcoholism Program in Libby, and with typical diligence began the long, frustrating job of making it happen. With little more than an unshakeable belief in the disease concept of Alcoholism, long hours of hard work, and a shoe lace, Royce made it happen and today the "Libby Program" ranks with the top treatment facilities in the state.

Royce, as a Director, advocates the common sense, practical approach to treatment. "If it works, use it, but don't assume that it will work forever". "If results are not what they should be, find out why and correct them." "First and foremost, be aware of what the client needs but don't lose sight of the needs of the program." "Failure is almost always a temporary condition and one doesn't give up when it happens." Such are the ingredients for success in the Libby program where results attest to the reliability of the methods.

Contrary to what you may have heard, Royce no longer spends 24 hours a day in his office. It's rumored that he was instrumental in having Libby Dam constructed to provide him with a fishing hole where he can practice one of the hobbies that he enjoys. If fishing doesn't furnish the desired degree of relaxation, there's archery, in which Royce has attained a high level of proficiency both as a hunter and in competitive tournaments.

Royce's bachelor status has enabled him to devote the long hours and week end labor that has kept the program in top condition. Certified in both counseling and management, Royce holds certificate #58.

The next time you're in Libby stop in and congratulate Royce on a job well done.

* * * * *

Quote to Note: "Individuals who come in to our hospital for snorting or smoking heroin usually started out on high doses of cocaine. They used the herion as a downer, and then acquired a taste for heroin, gradually shifting over to become primary abusers." Mark Gold, M.D., Fair Oaks Hospital, Summit, NJ.

Abigail Healy, first persons to hold recently created post of White House Liaison for Alcohol Issues, says "the alcohol field is perceived as fragmented, emotional and intense." She's urging professionals to "get together and iron out your differences."

After nearly 20 years, perhaps it's time to take Ms. Healy's advice seriously.

Federal Certification Standards

To date we have not received a copy of the new Federal minimum standards for Credentialing of Chemical Dependency Counselors. We do know, however, that the standards require an internship in an approved program prior to applying for certification. As soon as possible we will inform you of all other regulations and what action, if any, the Alcohol and Drug Abuse Division will take in respect to these proposed standards. Simplicity is an endangered commodity.

Examination Schedule

The new certification examination schedule is as follows: Please post this on your program bulletin board for those who still are working toward their certification. ADAD recognizes and is grateful for the excellent manner in which the Montana State Job Service Offices have presented the certification written examinations. As we begin the fourth year, many thanks to everyone in the job service!

ALCOHOL AN DRUG ABUSE DIVISION
COUNSELOR CERTIFICATION
EXAMINATION SCHEDULE

TAPE REVIEW	June 14, 15, 1984
WRITTEN EXAM	July 11, 1984
ORAL EXAM	August 10, 11, 1984
TAPE REVIEW	September 13, 14, 1984
WRITTEN EXAM	October 10, 1984
ORAL EXAM	November 9, 10, 1984
TAPE REVIEW	December 6, 7, 1984
WRITTEN EXAM	January 9, 1985
ORAL EXAM	February 8, 9, 1985
TAPE REVIEW	March 7, 8, 1985
WRITTEN EXAM	April 10, 1985
ORAL EXAM	May 10, 11, 1985
TAPE REVIEW	June 6, 7, 1985

Written examination presented by Montana State Job Service Offices.

Oral examination and tape reviews conducted in Helena at Alcohol and Drug Abuse Division Offices.

If you know that you will be unable to keep your oral examination appointment, please inform us in advance. Failure to show up or to call raises some questions concerning your professionalism.

CANADIAN HIGH SCHOOL STUDENTS SURVEYED say scare tactics are more effective than velvet glove approach in bringing anti-impaired driving message to young drivers, according to Insurance Bureau of Canada.

NEW ORAL AND TAPE EXAMINATION PANELS
FOR FY 1985

The following certified counselors will serve as certification oral examination panelists and tape review judges through June, 1985.

Oral Exam

Charlie O'Leary - Butte Drug Program
Mary Helen MacAskill - Montana State Prison Counselor
Barbara Moy - Lewis & Clark County Health Department, Helena
Scott Gibbs - Shodair Hospital C.D.U., Helena

Tape Review

Lynn Ramsey - S.C.M. Alcohol and Drug Program, Billings
Sue Carroll - Lighthouse Drug Program, Galen
Libby Artley - Recovery Foundation, Missoula
Marcia Armstrong - Boyd Andrew, Helena

These panelists and judges were selected by the ADAD Certification Section based on their experience, certification examination scores, general and academic background and counseling and communication ability. We are confident that they will continue the fair and impartial testing that has been demonstrated by previous panels.

* * * * *

CERTIFIED SINCE THE LAST PUBLICATION

244	Brennan, Gabriel	Chemical Dependency Counselor
245	Faricy, Pamela	Chemical Dependency Counselor
246	Griffith, Judy	Chemical Dependency Counselor
247	Jensen, Alta	Chemical Dependency Counselor
248	McArthur, Roxanne	Chemical Dependency Counselor
249	Miller, Donna	Chemical Dependency Counselor
250	Dale, Tom	Chemical Dependency Counselor
251	Luchau, Ronald	Chemical Dependency Counselor
252	Larson, Grace	Chemical Dependency Counselor
253	Pease, Mary	Chemical Dependency Counselor
254	Popp, Dennis	Chemical Dependency Counselor
255	Stiffler, James	Chemical Dependency Counselor
256	Denda, Charlotte	Chemical Dependency Counselor
257	Luchau, Kristin	Chemical Dependency Counselor
258	Atwood, Candace	Chemical Dependency Counselor
259	Shena, Cathy	Chemical Dependency Counselor
260	Line, Ann	Chemical Dependency Counselor
261	Gaylord, Kathy	Chemical Dependency Counselor
262	Pipe, Jim	Chemical Dependency Counselor
263	McLuskie, Dennis	Chemical Dependency Counselor
264	Balsamo, Joseph	Chemical Dependency Counselor
265	Lubke, Frederick	Chemical Dependency Counselor
266	Feldman, Patricia	Chemical Dependency Counselor
267	Donnelly, Marie	Chemical Dependency Counselor
268	Nagel, Delaine	Management/Supervision
269	Jensen, James	Chemical Dependency Counselor
270	Deihl, Shaun	Chemical Dependency Counselor

* * * * *

Fight Drug Abuse before it ruins us, said editorial in USA today, May 2. "Eighteen percent of our workforce is operating at less than three-fourths capacity because of drug and alcohol abuse. Absenteeism, accidents, personnel turnover and ins. costs push up the price of everything we buy -- make our goods less competitive abroad. The price tag: \$100 billion a year out of the pockets of taxpayers, consumers and stockholders. Some say we could cut that cost by legalizing drugs. But then the cost in wasted lives would be even higher than it is now. We cannot abandon the fight ... The battle to get America straight is going to cost a lot. But the cost of a nation tripping out is even greater."

ATTY GEN WILLIAM FRENCH SMITH told a Senate Appropriations subcommittee that coordination and cooperation is outstanding among federal agencies combatting illegal drug trade. "General," said Sen Dennis DeConcini, D-AZ, "you're not in touch with what's going on."

CERTIFICATION WORK SHOP CREDIT

We are once more urging you to obtain a certificate or a letter signed by the workshop sponsor or trainer to verify your attendance. You should then send a copy to the Certification Section to ensure credit. One copy should also be placed in your training or personnel file in order for you to have a permanent record.

There is a growing tendency for workshop sponsors, trainers and programs to tell participants that a list of those in attendance will be sent to the ADAD Certification Section and each person on the list will receive credit. No credit will be given unless the individual submits verification in the form of a letter or certificate. [See certification standards, page 3, paragraph 2]

* * * * *

FLICKS

As stated in the last Habit publication, 7 new films are now available from the Department of Health and Environmental Sciences film library. Of the many films previewed by the ADAD staff only these received excellent ratings. A brief summary of each follows.

SOME OF THE THINGS THAT GO ON OUT THERE

grades JS-A - 29 min. 1982 \$465.00 Rental \$40.00 [one week]

"Some of The Things That Go On Out There" is a 29 minute 16mm film about adolescence: The time of experimentation, testing, growing and changing. The film acts as a trigger of discussion starter for youth and adults by offering permission and stimulation to re-think and talk about what it means to become an adult in our culture today. It probes at the confusion, excitement and fast pace of contemporary life; it reviews ancient customs of becoming an adult member of a tribe or society; it explores the range of parent-youth relationships; and it identifies current "rites of passage": forming relationships, separating from parents, sexual activity, drug and alcohol use and abuse, and gaining independence.

The film does not answer the questions presented, nor does it provide a particular moral value system with which to make decisions. It presents situations and allows the audience to resolve the conflicts from their own points of view. It encourages dialog, inquiry and mutual understanding between and among youth and adults.

A 16 page study guide accompanies the film.

"LOTS OF KIDS LIKE US" is a 28-minute film made especially for young children living in a home where a parental drinking problem exists.

This sensitive film tells the story of Ben and his sister, Laurie, as they discover some important information about alcoholism. It dramatizes healthy ways for children to deal with alcoholism in the family. "You're not alone," and "it's not your fault," - are major messages of the film. Also shown are specific problem-solving techniques and additional information on alcoholism as it impacts the family.

"LOTS OF KIDS LIKE US" is a visually stimulating film, presented in a warm and delicate manner, sure to capture the attention of its young audience.

This film is the perfect addition to any family treatment program or an ideal foundation for beginning such a program.

"LOTS OF KIDS LIKE US" was produced in response to a nationwide survey of Alcoholism/Substance Abuse Centers by Gerald T. Rogers Productions.

YOU PACK YOUR OWN CHUTE

For years Dr. Eden Ryl has used the analogy of the parachutists who "pack their own chute"...control their own destiny...as a key point in her seminars. Eden vividly demonstrates that people create their own successes and failures. Exploring this premise in a variety of fascinating ways she shows how people choose their own behavior; how our behavior is based on conscious and unconscious assumptions; and how most individuals limit themselves through unrealistic fears and create their own biggest obstacle to progressive growth. But, as Eden points out in the film, "You create your own fears, so you can eliminate them."

To prove her point Eden puts her thesis to the test by facing her own worst fears head-on. She packs her own chute and leaps out of a plane 3000 feet over the Pacific Ocean.

When people see this distinguished scholar and behavioral scientist struggle to overcome her fear and succeed as a skydiver - a field as far removed as one can imagine from her sedentary role as a conductor of seminars - all things become possible for them. Here's help each person understands...and feels...and benefits from. Here's help that "turns around" poor attitudes...weak performances...and opens the way to greater personal and group achievement.

You Pack Your Own Chute won the American Personnel and Guidance Association's "Best of Festival" award, APGA's 40,000 members top honor. Educators say the film is equally effective with students at all academic levels, as well as faculty, administrators, support personnel and community groups. Business and industry leaders say it works with any group regardless of occupation, age or intellect, and that it meshes with any program.

This film for all seasons and all reasons dramatizes the fact that most people are their own biggest obstacle to accomplishment, and brings home the truth that all of us are responsible for our own behavior and have the power to change.

Here is an unforgettable experience that's infinitely personal and at the same time demands to be shared. It's not surprising that You Pack Your Own Chute is so highly acclaimed in so many diverse fields.

CHILDREN OF DENIAL

Claudia Black lectures on the effect that chemically dependent parents have on their offspring and how these personality disorders continue into adulthood.

A SLIGHT DRINKING PROBLEM

Starring Patti Duke Astin, James Hampton and Rue McClanahan Code 4106

Alcohol Abuse and alcoholism affects four times the number of non alcoholics compared to problems drinkers. The problems of the "significant others" is studied in the film "A Slight Drinking Problem."

Patti Duke Astin gives one of her finest performances as the sober wife of a practicing alcoholic. The supporting case of James Hampton and Rue McClanahan give this film an exceptional quality for all ages.

Jim is an alcoholic. He denies it. So does his wife, Loretta. Yet his repeated alcoholic escapades cause her embarrassment and great suffering. In desperation, Loretta attends an Al-Anon meeting. Learning to assume responsibility for her own life, she abandons her victim's role and lovingly allows Jim to assume responsibility for himself. This means she must let him face the consequences of his own actions, even if it means losing his job and hitting bottom. Loretta's new attitude transforms their relationship and forces Jim to face the truth about himself. He has a 'slight drinking problem' and he is the only one who can decide to do anything about it.

"We were impressed with the way your film portrayed the effects of alcoholism on the family of the problem drinker and how the family found strength and hope through the sharing of experiences in the Al-Anon group."

Al-Anon World Services Office

FALLING BACK

"Dry drunk" is a term that has been tossed around for years without its meaning, symptoms, and consequences being widely recognized. "Dry drunk" refers to the resurfacing of past alcoholic behavior that can lead the recovering alcoholic one step closer to relapse.

FALLING BACK: THE DRY DRUNK SYNDROME is a unique film experience that dramatizes the series of identifiable attitude and behavior changes that constitute a dry drunk.

If you are personally or professionally involved with chemically dependent people and their families, you will recognize the pain and sadness of dry drunk syndrome related in the film. And you will find a message of hope. Using a story within a story format, the drama presents the stories of two recovering alcoholics and their struggle to remain sober.

As the personal tragedy of dry drunk syndrome unfolds in these two different life situations, the film presents the most current information available on the subject. It communicates the myriad symptoms of a dry drunk. The grandiosity, the blame, the anger, all the self-destructive behavior of the alcoholic on a dry drunk, is brought to vivid life on the screen. FALLING BACK: THE DRY DRUNK SYNDROME utilizes a highly dramatic form that artistically recreates for the audience the confusion between reality and delusion that is often experienced by victims of a dry drunk.

FALLING BACK: THE DRY DRUNK SYNDROME communicates the dangers of a dry drunk while dramatically identifying the many options available to anyone who may be, now or in the future, confronting the terrifying reality of a dry drunk. The film shows, in very moving terms, that by reaching out to others, help and hope is available. Relapse does not have to happen.

I'LL QUIT TOMORROW

The film "I'll Quit Tomorrow" is based on a copyrighted book with the same title written by vernon E. Johnson.

The film consists of three reels with a total running time of 88 minutes.

- storyline tells of what happened to Steve Miller and his family as he develops the illness of alcoholism.
- describes how it progressed in his family and work life.
- traces the progress of the disease and how it was arrested by a successful intervention by the family and employer and how treatment was given in a hospital setting.
- also describes the behavior of the significant persons around Steve and how they at first enabled him to get sicker, but later helped in his recovery.

THE USE OF THIS FILM IS RESTRICTED TO STATE APPROVED CHEMICAL DEPENDENCY PROGRAMS ONLY.

Meanwhile, Down on the Farm

CONGRESSIONAL BRIEFING IN HONOLULU, during fact-finding mission to Okinawa, Hong Kong, Thailand, Burma, Pakistan, Turkey and Rome, was "appalled to learn" during four-hour briefing in Honolulu that illegal marijuana growing in Hawaii is a larger industry than legitimate agriculture.

FRANCESCA, BABY

Although this film is not new, ADAD has renewed the rental agreement on it. The film is available through the State Film Library to state approved chemical dependency programs only.

It portrays the enabling behavior of the teenage daughter of an alcoholic mother, and the problems that ensue. Alateen plays an important role as the story progresses. Excellent for adolescents who may find themselves in the same position, but reject the help available in Alateen.

To Reserve Any of the Films Call or Write:

Department of Health & Environmental Sciences
Film Library
Cogswell Building
Helena, MT 59620

DEFICIT SPENDING

AVERAGE 800-COCAINE CALLER is a 30-year-old male [male callers out-number women 2-to-1], a white-collar worker with 14 years of education who's been using the drug for four years. He earns \$25,000 a year at his job--and spends \$30,000 a year on cocaine.

Of the 268 people now certified in Montana, 128 or 48% are women. A rather comforting statistic.

MOTHERS AGAINST DRUNK DRIVING (MADD) supporting model drunk driving laws proposed by National Assn of Independent Insurers (NAII). MADD says the laws should be enacted in every state. Details: Charles J. Lorenz, vp/public relations, NAII, 2600 River Road, Des Plaines, IL 60018-3286. Mention model drunk driving laws.

"Pulse Beats" June 1984

APRIL 30 ALCOHOLISM REPORT, JOHNSON INSTITUTE

"There is no scientific evidence that Alcoholics Anonymous is more effective than other approaches used in alcoholism treatment; what evidence does exist suggests that AA is about as effective as most other approaches."

This was one of the key conclusions in a 12-month review of 134 studies bearing on the effectiveness of AA and counseling in the treatment of alcoholism by Human Relations Area Files, Inc., (HRAF), New Haven CT. Results of the review, directed by David Levinson, Ph.D., were published by HRAF Press in "A Guide to Alcoholism Treatment Research: Volume III, Alcoholics Anonymous and Counseling."

In a news release, HRAF said the effectiveness of the two approaches, i.e. AA and counseling, is a "key issue, as more than 50 percent of the 2 million people treated for alcoholism in the U.S. each year are involved in one or both of these types of programs."

Among the conclusions about AA, HRAF said: "The majority of people who turn to AA for help with their abusive drinking drop out of the program before they become meaningfully involved in it. In this regard, AA is much like other programs, which also suffer from high drop-out rates. Alcoholics Anonymous seems to be most effective when used for follow-up aftercare by persons who have recently completed an inpatient rehabilitation program.

"While Alcoholics Anonymous attracts a wide range of people from all walks of life, it is clear that AA works for only a minority of alcoholics. Unfortunately, research to date has not yet identified the specific social and psychological characteristics which distinguish those people most likely to benefit from involvement in AA."

Regarding its study of Al-Anon, HRAF said that "members of Al-Anon who are married to men with drinking problems are better able to cope than non-members with their husbands' abusive drinking and related problems."

Among its conclusions about counselors, HRAF said that "although hard scientific evidence is lacking, the available evidence suggests that counseling is often an effective component of the alcoholism treatment program."

At the same time, it said "recovered alcoholics are not more effective counselors than non-alcoholics" and "counselors with extensive work or professional experience are not necessarily more effective than those with limited experience."

"Participation in a formal counselor training program often increases a counselor's knowledge about alcoholism and sharpens his or her therapeutic skills," HRAF said.

HRAF is a private non-profit social and behavioral sciences research and information organization supported by some 300 universities and libraries throughout the world. (Human Relations Area Files, PO Box 2054, Yale Station, New Haven, CT 06520; 203/777-2334)

* * * * *

RECOVERY GUIDE FOR AMERICAN INDIAN ALCOHOLICS

From: NIDA Health Service News, June, 1984.

The American Indian Eagle Lodge in cooperation with the American Indian Free Clinic announces the publication of the Traditional Awareness Group Recovery Guide.

The publication can be used by recovering Indian alcoholics as a guide for their personal growth, as well as a guide to form their own support system. Alcoholism counselors can use it as a tool in counseling Indian alcoholics individually or as a guide to group activities within the structure of their own programs. Moreover, it is very effective for a group activity within the families of the Indian alcohol abuser.

FDA APPROVES NICOTINE GUM MARKETING

The United States Food and Drug Administration (FDA) has given approval for the marketing of nicotine chewing gum which can help smokers kick the habit.

Edward Tocus, Ph.D. head of the FDA Drug Abuse Section, said the gum is not a panacea, but experiences in Canada, Britain, and Sweden suggest it works with some smokers.

An FDA advisory committee concluded the gum, Nicorette, is effective as an adjunct to a program for modifying smoking behavior (The Journal, April 1983, July, 1980).

The FDA and manufacturer Merrell Dow Pharmaceuticals caution that the gum should not be used by pregnant or nursing women, those with certain heart conditions, or by non-smokers. They say that under normal use the gum is not expected to be addictive.

* * * * *

COCAINE

Cocaine is derived from the leaves of the Erythroxylon coca plant, a shrub which grows in Bolivia, Peru and Java. The stimulant effects of the drug made it a treasured possession among the Incas, a fact which the conquering Spaniards were quick to notice. By providing the leaves to the Inca slaves, the Spaniards induced the natives to work with less protest in the mines. The modern experience with the plant began in 1844 when the alkaloid cocaine was first isolated.

In 1883, Dr. Theodor Aschenbrandt administered the drug to Bavarian soldiers on winter maneuvers. News of this spread to Sigmund Freud, who utilized the drug to maintain concentration on his studies, and in therapy with a few clients. Although he wrote and published a "Song of Praise" to cocaine in 1884, he became disillusioned with its side effects and ceased his use, as well as his praise, of the drug in 1887. Although it was used in soft drinks and patent medicines until 1906, it was classified with the opiates as a narcotic and outlawed under the Harrison Narcotic Act of 1914. The fact that the drug cocaine bears no chemical or biological relationship to the opiates is not recognized at present by the U. S. Bureau of Narcotics and Dangerous Drugs.

EFFECTS

Cocaine is a powerful central nervous system (CNS) stimulant that produces excitement, restlessness, and intensely euphoric feelings. Its initial effect on the body is to raise the blood pressure by constricting the circulatory system, and by increasing the rate of respiration. Individual respirations are shallower than normal breathing. The pupils become dilated, body temperature increases, heart beat accelerates, and light sweating may occur. Feelings of hunger and fatigue are masked, while thirst is increased. Common routes of administration are snorting or injecting. Eating the drug produces little effect. The taste is very bitter. The drug acts as a topical anesthetic and is still prescribed by doctors for specific situations. Although the drug bears the reputation of being the "rich man's habit," the declining production of amphetamines had radically increased general use of cocaine. This has not, however, lowered the price, which ranges between \$40 and \$80 per gram, depending on the quantity purchased and the purity of the substance.

The initial effects of the drug are felt almost immediately when snorted. When injected, there is an enormous rush immediately following its introduction into the bloodstream. The strong effects last from 30 to 40 minutes. This often leads to a pattern of daily abuse, in which an individual will inject or snort cocaine every 10-30 minutes in order to perpetuate the euphoric rush. The lethal dose varies widely across the population, but remains constant within an individual. Thus, although a user may rapidly increase his or her daily consumption, even as high as 10 grams per day, the dosage at which death occurs does not increase. Toxic doses as low as 20 mgs and as high as 10,000 mgs have been recorded.

OVERDOSE

NOTE: If you suspect an overdose, turn to Guidelines for Common Overdoses in First Aid Section and Amphetamines--Overdose.

The symptoms of cocaine poisoning are the same as those of amphetamine overdose. Large doses which reach the heart may cause an immediate reaction with the heart muscle resulting in death. Symptoms of an overdose include breathing difficulties, convulsions, and chest pain.

At the hospital:

1. A short-acting barbiturate may be administered intravenously.

2. Anti-convulsants are ineffective in the treatment of convulsions in the terminal stages of cocaine overdose.

* * * * *

US TEEN COCAINE USE 'INCREASING DRAMATICALLY'

An explosion of cocaine addiction among teenagers and young adults in the United States is being picked up on the 800-COCAINE telephone hot line operated by Mark Gold, MD, and colleagues at Fair Oaks Hospital, Summit, New Jersey.

"We're seeing a real trend in the direction of high school and college age cocaine addiction, and cocaine is the only drug, to my knowledge, which is increasing in use dramatically by adolescents," Dr. Gold told The Journal.

A preliminary study of callers by Dr. Gold and colleague Linda Semlitz, MD, indicates young people develop addictive patterns within six to twelve months of starting to use the drug, compared with an average of four years in adults.

Dr. Gold said the short age-to-insult pattern (time between first use and addiction) is because young people are not fully formed physiologically or psychologically.

Dr. Gold said measurements include physical, medical, social, school, and family problems. He said: "We get a lot of calls from university cities. As the end of the school year approaches, we hear from people who won't be able to finish the course, or will have to drop out of college, because of their cocaine addiction."

Most callers said they snort cocaine, "although we have a few intravenous users and apparently a lot of freebasers." About 80% of the young callers said they get money to buy cocaine from dealing or distributing the drug.

"We have had rare cases where kids found their parents' cocaine and then started to use and then sell the drug," he said.

Dr. Semlitz, who with Dr. Gold spoke at the international PRIDE parents concerned here, said about 90% of young abusers are white and middle class" and it is important to remember that the average caller is not representative of the average user. Those who call the hotline define themselves as problem users and most kids who use cocaine don't think they have a problem."

An initial appeal apparently is that cocaine "makes you feel good about yourself. But that lasts only about five minutes, and in heavy users it is not an issue. They are debilitated, depressed, and paranoid as adults."

Dr. Semlitz said that almost without exception the young people are naively surprised at the questions they are asked by researchers; how did you know? and how did you guess what I am going through? are frequent responses.

The major difference between young people and adults is that instead of a two-to-one male slant, callers are almost 50-50 male and female.

"I think there is a good reason for that: many of the girls are involved sexually with active cocaine users, and that is how the girls get the drugs. Most girls don't deal," Dr. Semlitz added.

Another group of young women calling the hotline don't identify themselves as having a drug problem but an eating disorder, or bulimia.

Dr. Semlitz said, "They don't even use marijuana or alcohol particularly. What they have found is that cocaine curbs your appetite. Most bulimics think their eating-purging problem is out of their control. And what cocaine gives them, they think, is this full sense of control. The problem is that they are more out of control with cocaine than they ever were before."

William Pollin, MD, director of the US National Institute of Drug Abuse, told The Journal that it is clear that overall the level of all drug use in the country has peaked and has started to come down.

"But within that still sizable group called users we still have some five million cocaine users, and some subgroups are starting to use it more heavily," he said. "Cocaine is much cheaper to buy and the supply has increased six-fold."

While some subgroups are using more heavily, finding are still compatible with indications that overall drug use is declining.

LOW ALCOHOL BEER

The debate over whether Miller Lite Beer is less filling or just tastes great continues in the seemingly endless series of award-winning TV commercials featuring sports personalities.

But the debate over the success of light beers has ended. In 1975, light beers captured less than 2 percent of the beer market, while in 1982, light beers were responsible for 16.7 percent of the total beer market.

Although most light beers have a third or less fewer calories than regular beers, there is some questions about whether the market for such beers actually lies with diet conscious imbibers.

There is evidence that Miller created the original "light beer" not to appeal to diet conscious beer drinkers, but to the traditional heavy beer drinker. That is, the "serious" beer drinker who normally downs a six-pack at a sitting.

The appeal of the light beers to heavy beer drinkers is that they can consume their usual level of their favorite brew without feeling "full."

However the debate on the target market for light beers comes out, there is no questions about the target for the latest trend among the nation's brewers.

It all began last August with Hudepohl, a Cincinnati-based original brewer which test marketed a low-alcoholic content beer, Pace. The new brew contained less than 2% alcohol, half the alcoholic content of most beers, light and otherwise.

Positioned by Hudepohl as a "responsible alternative" to the regular brews, the advertising is aimed at those concerned about the growing awareness of alcohol abuse, particularly drunk driving.

Hudepohl did not aim its Low-Alcohol (LA) brew at the occasional imbibor, the sometimes beer drinker who occasionally has a cold brew at the ball game or after mowing the lawn.

The target market was the "real beer drinker." The generally accepted rule is that 15% of the beer drinkers down 85% of the suds. Hudepohl was aiming at that part of the beer market.

The test marketing was so successful that now the major brewers are standing in line with their version of LA beers, following Hudepohl's lead.

Anheuser-Busch, the nation's largest brewer, is presently test marketing L.A. Beer in cities from California to Rhode Island and Stroh, the nation's third largest brewer, has announced that it is entering the low-alcohol beer market with Schaefer L.A. brew.

In a recent TV appearance on the Donohue show, William Coors, the Chief Executive Officer of the nation's sixth largest brewer, admitted that alcohol abuse is the chief concern of the liquor industry today. Coors also said that every major brewer is currently planning to introduce a version of low-alcohol beer in the near future.

The impact of the new LA beers will depend on their acceptance among those "real beer drinkers."

Stroh has announces that they plan to revive one of the most successful ad campaigns in brewing history with their Schaefer L.A. brew, "the one beer to have when you're having more than one."

If those real beer drinkers shift to LA beers, there would indeed be a positive impact on alcohol abuse problems.

Monday Morning Report - Vol.8, No.8, April 9, 1984

* * * * *

PHYSICIAN ON STAFF OF US OLYMPIC COMMITTEE said drug testing should be required in professional team sports.....In panel discussion on "Face the Nation," Dr. Roy Bergman called for a "grandfather clause -- after 1985 a condition for employment in the NFL will be testing." Also on the panel were Lawrence O'Brien, outgoing commissioner of the National Basketball Assn (NBA), and Gene Upshaw, executive director, National Football League Players Assn. "I feel it's a privilege to be on the Olympic team," said Bergman. "If they (athletes) say they don't want to be tested, they won't make the team." Bergman added: Drug use "doesn't start as a disease. It starts as peer pressure. It's a conscious decision to try drugs."

SMOKING - AN OPEN DOOR TO OTHER DRUGS

From "LISTEN" A Journal of Better Living, April, 1984

"If a parent can keep his child from smoking cigarettes," said Forest S. Tennant, MD, Dr. PH, "that child's chances of becoming a drug abuser are extremely low." Dr. Tennant, executive director of Community Health Project, Inc., of West Covina, California, and associate professor of epidemiology at UCLA School of Public Health, discusses the unique dangers of smoking to children in an article entitled "Smoking -- An Open Door to Other Drugs" appearing in the May issue of LISTEN Magazine.

"Drug dependence," he says, "including alcohol dependence, is associated with cigarette dependence, and cigarette dependence predates any of the other drugs." Dr. Tennant points out that those who take up smoking after they have become adults do not tend to become an alcoholic or drug abuser any more than does anyone else. But "a child or a teenager who smokes cigarettes should be regarded as a future alcoholic or drug abuser until proven otherwise."

The major reason for this, Dr. Tennant says, is that smoking cigarettes seems to precondition children to alcohol and drug use. "The person who's already an experienced cigarette smoker," he says, "tolerates the marijuana or the cocaine, and it may be just because he has learned the mechanical act of smoking and has calloused his respiratory system...to irritating substances. You simply don't see many teenagers who tolerate these drugs, including alcohol, unless they're previously cigarette smokers."

"If there were no cigarettes available to kids under eighteen," Dr. Tennant concludes, "I would not be surprised if drug problems were cut by 50 percent. I would predict it."

* * * * *

SMOKING AND UNEMPLOYMENT

From "LISTEN" A Journal of Better Living, April, 1984

"The bleak truth for smokers," says William L. Weis, PhD, CPA, "is that more and more of their potential future employers and fellow employees simply don't want to be around smoke anymore." In an article in the May issue of LISTEN magazine entitled, "Warning: Smoking is Dangerous to your Career," Dr. Weis summarizes the outlook for smokers planning to enter the job market.

And the picture is not rosy. Based on his own 1981 survey, Dr. Weis, an associate professor of business at Seattle University, says that "the odds-on favorite in a head-to-head competition between two equally qualified job applicants is the nonsmoker by a margin of 94 percent."

He further states that demographic analysis of the 1979 Surgeon General's Report and Department of Labor employment statistics for 1982 indicates that unemployment for smokers is twice as high as for nonsmokers. "Employers," he says, "will not tolerate for long a behavior that is both adding to the cost of doing business and is the major source of impaired employee morale and health. He cites, for example, smokers' higher absenteeism, premature disability and mortality, and on-the-job time lost to the smoking habit as contributing to costlier productivity.

"For every employer," Dr. Weis adds, "who is bold enough publicly to restrict hiring to nonsmokers, there are nine others who select privately against smokers, afraid to announce publicly their policy for fear that it might depart from equal-opportunity hiring statutes." He explains that such standards are legal, however, because smoking is an achieved characteristic: and all employers discriminate, legally and ethically, on the basis of job-related, achieved characteristics."

* * * * *

MARKETING TEST OF LOW-ALCOHOL BEER showed that few people bought Anheuser-Busch's LA brand, said Michael Roarty, brewer's marketing director. Roarty, however, said those who did were pleasantly surprised by its taste. In fact, they came back to buy LA again--at twice anticipated rate. Test also showed that half those who tried LA were switching from a light beer with roughly same number of calories--mostly Miller's. "If LA does little more than take market share away from its nemesis," said Fortune, "Anheuser-Busch will be satisfied."

QUOTE TO NOTE: "There is no such thing as 'responsible use' of an illegal substance." -- Donald Ian MacDonald, nominated for administrator, Alcohol, Drug Abuse and Mental Health Administration (ADAMHA).

From "Pulse Beats" July, 1984

#800-554-KIDS: The toll-free hot-line for the National Federation of Parents for Drug-Free Youth. By calling this number, you gain access to:

- A how-to-manual for beginning parent groups;
- A national speakers bureau;
- An information kit containing a bi-monthly newsletter, a legislative update and a series of informational pamphlets;
- A brochure on "Guidelines for Starting a Parent Group in the Community";
- Sample by-laws for groups whose purpose is to oppose alcohol and drug abuse;
- A Drug Education and Public-Speaking manual, containing sample outlines for speeches, resource information, pitfalls to avoid in speaking about the issues, etc.;
- Technical and followup assistance for new groups;
- A manual for working with the media;
- A national conference held every fall to share the newest ideas on educational programs, raising money, using audio-visual materials, etc.

* * * * *

CHANGES

Vera Towery (Brunckhorst) formerly Park County Alcoholism Program Counselor in White Sulphur Springs, now a counselor with Lincoln/Sanders County Program in Libby.

Vera Carey - formerly a Hill Top Recovery Center counselor in Conrad, now in the same place and capacity, but due to program changes, a Boyd Andrew Service Center employee.

Barbara Pipe - who was Director of District I Program at Wolf Point is now employed in a counseling capacity at Hill Top Recovery Center in Havre. Baton Rouge, LA was in between.

Bruce Sjolie, Don Kurtz - Rimrock Foundation counselors now employed by St. Patrick's Hospital C.D.U. in Missoula.

Brenda Lillie is Acting Director at Shodair Hospital Adolescent C.D.U. in Helena.

Maxine Jacobson - counselor certificate #9, resigned from Recovery Foundation, Missoula to return to school. A tour of Europe precedes enrollment.

* * * * *

TAX DEDUCTIONS: Treasury Regulation 1-162-5 permits an income tax deduction for education expenses (registration fees, cost of travel, meals and lodging) undertaken to (1) maintain or improve skills required in one's employment or other trade or business; (2) meet expressed requirements of an employer or a law imposed as a condition to retention of an employment, job status, or rate of compensation. (The IRS recommends you keep a daily record of expenditures in accordance with this regulation).

NATIONAL FEDERATION OF PARENTS FOR DRUG-FREE YOUTH (NFP) resoundingly rejected any educational, prevention or treatment program which advocates or condones the "responsible use" of illicit drugs, including use of alcohol by minors, and further rejects use of tax dollars supporting a "responsible use" message.

FBI AND DEA AGENTS began briefing United State Football League teams on dangers of sports bribery, sports betting and drug trafficking...Program first was introduced to National Basketball Assn teams in November 1982...Has since been extended to major League baseball, National Football League and National Hockey League.

ARMY CHIEF OF STAFF GEN JOHN A. WICKHAM JR clamped down on practice of "happy hours," offering bargain-priced drinks around cocktail time. Such hours may still be held but drink prices can't be reduced during these periods.

And the boozers are the losers.

From "Pulse Beats" July 1984

Documentary Focuses on 'the hidden victims'

The most profound environmental issue today in the vast Amazon river basin in South America is coca bush cultivation for cocaine extraction.

Jean-Michel Cousteau was so affected by what he and his father, Jacque Cousteau, found on a trip up the Amazon that they produced a special documentary for airing on United States television this fall.

While Mr. Cousteau's father and the yacht Calypso sailed from the mouth of the Amazon to Iquitos, Peru, more than 2,000 miles inland, Jean-Michel traveled 1,800 miles in the other direction from the source of the Amazon to Iquitos.

"We were constantly reminded of the presence of coca bush plantations which are being developed on the eastern flanks of the Andes," Jean-Michel Cousteau told the international conference here of the PRIDE parents organization.

"For months and months while we were there we were approached in different ways to cooperate, or consume, or, perhaps, it was implied, to be transporters (of cocaine). We were put under certain threats from one country to another."

Mr. Cousteau said the expedition was to explore the Amazon. But, "were we going to put this aside and ignore it, or are we really talking about an environmental issue, (although it's one) which does not affect little fish or little plants?

"Do we know this side of the world - and, in a major way (are we) responsible for what happens out there - do we really know what happens out there?"

Mr. Cousteau flew to Atlanta to talk with officials of a cable television network which had contracted for six hours of programming on Jacques Cousteau and his work. Jean-Michel explained what was going on, said the Cousteaus believed they had something to contribute and immediately arranged for backing for a documentary.

With the help of US officials, including Carlton Turner, PhD, director of the White House Office on Drug Abuse Policy, and the Peruvian government and local officials, "we were able to go places where, had we not had this support, we would never have come back."

Mr. Cousteau said the hour-long documentary only scratches the surface "because the more we went into the problem, the more we found it was endless.

"We have focused on the hidden victims. We are not interested in the politics or the economics, although they are linked, but in the people who are paying the bills, people who are losing their lives, people who are not able to know what really is happening, because nobody has told them, or because a lot of people take advantage of them."

It works the same way on the other side of the world' producers will grow more and more as there are more and more consumers, and the consumers are victims as well, he said.

"Looking at the two extremes, they are closely related, and they don't know each other. They don't know the existence of each other. They don't know the sacrifices which they go through as this formidable machinery is taking advantage of those of each side," he said.

Indians whose culture included chewing coca leaves are now under incredible pressure by outside influences. They are being forced to switch to only one crop - the coca bush. Many are now slaves to the trading post, or the company store, where their bill is always more than they earn from coca leaf crops.

Mr. Cousteau: "As you fly over, you are absolutely amazed by the coca plants growing on the low flanks of the Andes. You see concrete airstrips, built in one month, for jets to fly in to take away tons of coca paste."

And there is "always - always - the threat of violence. People are threatened. People are scared. People live on the edge of life all the time."

One scene in the documentary shows an 18-year-old Indian girl, with a one-month-old baby, who was sentenced to 10 years in jail for carrying coca paste from one bus station to another.

The baby was left on the street.

"These are the victims," he declared, "the ones we never talk about. The little people."

"Another aspect we were totally overwhelmed about is that the pits used to produce coca paste are draining into and polluting the river."

Mr. Cousteau recounted stories of a number of people with whom he and his crew met and talked. "I have met an unbelievable number of young people, wonderful people, who have confessed to stealing from their mother, father, family, school teacher, any way possible, to buy coca paste," he went on.

"We found one man who consumed 80 to 90 coca paste cigarettes every night...We met a former engineering student in a jungle town who would do anything for a coca paste cigarette.

"His departing words were: 'You show this to them out there. If they don't believe it, you tell them to come and see me. I am a wreck. I don't even remember my age.'"

There are no statistics on the little people selling coca paste cigarettes, but they must be in the tens of thousands. Most farmers don't know what they are doing, said Mr. Cousteau, they just know there is a growing demand for coca leaves.

He said the West must remember the Chinese opium wars at the turn of the century and what they did to Chinese culture.

"We are seeing the same thing happening out there, and we cannot let it go by without showing what we have seen," he added.

The principles for which the US stands, and the pride with which they are projected around the world, are "being put under tremendous pressure, I believe."

Thousands of people are being sent to jail, or threatened or killed, and they don't know why. "Lives are screwed up and they don't know why."

Reprinted from "The Journal"
Toronto, Ontario. June 1984

* * * * *

WHAT'S ALL THE FUSS ABOUT STEROIDS?

With the Olympics in Los Angeles only a few months away, attention will again return to athletes' use of steroids. This issue, which came under close scrutiny in last year's Pan American Games, has plagued the sports world for several years, according to an interview in the April issue of LISTEN magazine with Dr. Donald L. Cooper, a member of the President's Council on Physical Fitness and Sports and physician for the U.S. Olympic team in Mexico City.

In the article, entitled "Steroids: Are They a Shortcut?" Dr. Cooper says that the steroids that athletes use are referred to as anabolic-androgenic steroids, hormones found naturally in the body that help to regulate its basic function. "These," he says, "are used by weight lifters and other athletes trying to increase their size and their bulk."

But Dr. Cooper comments that there are specific dangers in the use of steroids. "Taking steroids," he says, "creates an imbalance in the body's hormone levels. The hormones work with each other by a system of checks and balances. If the levels get out of balance, you can have problems." Dr. Cooper points out that this can be unhealthful to athletes, especially young athletes.

Some of the risks include chemical hepatitis and changes in secondary sex characteristics. "Studies in England," he adds, "have associated cancer of the liver with the taking of anabolic-androgenic steroids."

He further says that steroids cause a closing of the growth plate at the end of the body's long bones. "Thus," he says, "a young person who is still growing and who takes steroids will end up being of shorter stature than he would be otherwise."

Although there is legitimate medical use of steroids in certain cases, Dr. Cooper says that there are no shortcuts to athletic development. "There's only one way to be a good athlete,...and that's through hard work and repetition and practice."

From "Listen"
A Journal of Better Living
1984

TAKE THE PLEDGE

A local parent group in Sacramento, California, started the ball rolling on a project that resulted in the dissemination and use of the pledge shown here. The Department of Motor Vehicles, the California Highway Patrol, and Californians for Drug-Free Youth cooperated on the printing of the pledge as part of a pamphlet which briefly discussed drugs, driving, and the responsibilities involved.

One high school in San Jose put the pledge to use in this way: It was placed in corsage boxes and tuxedo pockets; the signed contract was required for admission to the prom.

Californians for Drug-Free Youth encourages other groups to copy and use the brochure containing the pledge and to add local groups' names and funding sources. For a xerox copy of the pamphlet, contact NADIC, Room 3 Coliseum, University of Nebraska, Lincoln, NE 68588-0136; (402) 472-3899.

THE PLEDGE

We sign this pledge as acknowledgement of our understanding that driving is a privilege:

As a young driver, I pledge:

- ° To avoid driving at any time after using alcohol or other drugs, and
- ° Never to drive when alcohol or other drugs have impaired my abilities
- ° To call my parents at any time for transportation when I must drive or ride with a driver under the influence of alcohol or other drugs.
- ° To wear my safety belt at all times, and to remind my passengers to do the same.

Signature _____
Date _____

As a parent, I pledge:

- ° Never to drive when alcohol or other drugs have impaired by abilities.
- ° To pick up my youngster, or arrange for his or her safe transportation, whenever the youngster has used alcohol or other drugs, or might be required to ride with an alcohol or drug influenced driver and no questions asked.
- ° To wear my safety belt at all times and to remind my passengers to do the same.

Signature _____
Date _____

From the Nebraska Prevention Center
for Alcohol & Drug Abuse Newsletter-July 1984

* * * * *

RE-CERTIFICATION - "I'LL START TOMORROW" R. MacConnel

The Certification Section is happy to report that of the 15 counselors whose certification expired on June 30, 1984, all but two successfully attained sufficient recertification points to validate their certificates for another 3 year period. The two counselors who did not meet recertification requirements were, at the time, not active in the field.

It should be of interest to all certified persons that the Certification Section will permit you to carry over into the next 3 year period up to 10 training points that are in excess of the 15 required.

Just a reminder that June 30, 1985 is nearer than you may think. 48 people will need to meet the recertification requirements by that time. If you haven't had any continuing education to date, you have 10 months to accumulate 30 points, in clearer perspective thats 105 workshop training hours or 12 college credits and up to 15 months of full time employment. The post certification "let down" can prove costly.



350 copies of this publication were produced at a unit cost of \$.41 per copy, for a total cost of \$143.50, which includes \$112.70 for printing and \$30.80 for distribution.

Return Postage Guaranteed
by ADAD, 1539 11th Ave.
Helena, MT 59620

Bulk Rate
U.S. Postage
P A I D
Permit No. 89
Helena, MT